

Minutes of the meeting of the Quality and Patient Safety Committee of the Board of Directors of the Cook County Health and Hospitals System held Friday, September 20, 2019 at the hour of 10:00 A.M. at 1950 W. Polk Street, in Conference Room 5301, Chicago, Illinois.

## **I. Attendance/Call to Order**

Chair Gugenheim called the meeting to order.

Present: Chair Ada Mary Gugenheim and Directors Mary Driscoll, RN, MPH and Layla P. Suleiman Gonzalez, PhD, JD (3)

Telephonically  
Present: Patrick T. Driscoll, Jr. (Non-Director Member)

Absent: Director Heather M. Prendergast, MD, MS, MPH (1)

Additional attendees and/or presenters were:

Michael Alebich, DO – Attending Physician,  
John H. Stroger, Jr. Hospital of Cook County  
Laethecia Arnold – Health Information Coding  
Quality Manager  
Jeff McCutchan –General Counsel

Tara Ruhlen – Director of Planning and Analysis  
Deborah Santana – Secretary to the Board  
John Jay Shannon, MD – Chief Executive  
Officer  
Ronald Wyatt, MD – Chief Quality Officer

## **II. Public Speakers**

Chair Gugenheim asked the Secretary to call upon the registered public speakers.

The Secretary responded that there were none present.

## **III. Report from Chief Quality Officer**

### **A. Regulatory and Accreditation Updates**

### **B. Metrics (Attachment #1)**

Dr. Wyatt provided an overview of the metrics. The Committee reviewed and discussed the information.

### **C. Update on Clinical Documentation Improvement (Attachment #2)**

The following individuals provided an overview of the presentation on Clinical Documentation Improvement: Dr. Michael Alebich, Attending Physician for the Division of Hospital Medicine at John H. Stroger, Jr. Hospital of Cook County; and Laethecia Arnold, Health Information Coding Quality Manager. The Committee reviewed and discussed the information.

The Update included information on the following subjects:

- Background
- Documentation and IMPACT 2020
- How Documentation Works
- Capture Rate
- Case Mix Index
- Aim Statement
- Plan, Do, Study, Act
- Data

**IV. Action Items**

**A. Approve appointments and reappointments of Stroger Hospital Department Chair(s) and Division Chair(s)**

There were none presented for consideration.

**B. Executive Medical Staff (EMS) Committees of Provident Hospital of Cook County and John H. Stroger, Jr. Hospital of Cook County**

- i. Receive reports from EMS Presidents
- ii. Approve Medical Staff Appointments/Reappointments/Changes (Attachment #3)

Dr. Trevor Lewis, President of the EMS of John H. Stroger, Jr. Hospital of Cook County, and Dr. Valerie Hansbrough, President of the EMS of Provident Hospital of Cook County, were not present to provide their reports.

Director Driscoll, seconded by Director Suleiman Gonzalez, moved to approve the Medical Staff Appointments/Re-appointments/Changes for John H. Stroger, Jr. Hospital of Cook County. THE MOTION CARRIED UNANIMOUSLY.

Director Driscoll, seconded by Director Suleiman Gonzalez, moved to approve the Medical Staff Appointments/Re-appointments/Changes for Provident Hospital of Cook County. THE MOTION CARRIED UNANIMOUSLY.

**C. Minutes of the Quality and Patient Safety Committee Meeting, August 23, 2019**

Director Driscoll, seconded by Director Suleiman Gonzalez, moved to accept the Minutes of the Quality and Patient Safety Committee Meeting of August 23, 2019. THE MOTION CARRIED UNANIMOUSLY.

**D. Any items listed under Sections IV and V**

**V. Closed Meeting Items**

- A. Medical Staff Appointments/Re-appointments/Changes**
- B. Claims, Litigation and Quality and Patient Safety Matters**
- C. Matters protected under the federal Patient Safety and Quality Improvement Act of 2005 and the Health Insurance Portability and Accountability Act of 1996**

The Committee did not recess into a closed meeting.

**VI. Adjourn**

It was noted that the meeting time for the remaining Committee Meetings in 2019 is changing; the meetings in October, November and December will be held at 10:30 A.M., instead of 10:00 A.M.

As the agenda was exhausted, Chair Gugenheim declared the meeting  
ADJOURNED.

Respectfully submitted,  
Quality and Patient Safety Committee of the  
Board of Directors of the  
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
Ada Mary Gugenheim, Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
Deborah Santana, Secretary

**Requests/follow-up:**

There were no requests for follow-up at the meeting.

Cook County Health and Hospitals System  
Quality and Patient Safety Committee Meeting  
September 20, 2019

ATTACHMENT #1

# QPS Quality Dashboard



September 20, 2019



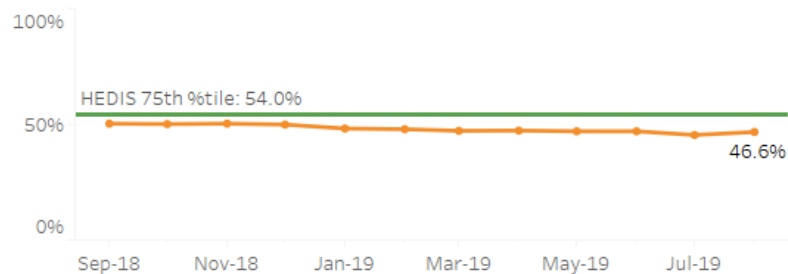


# COOK COUNTY HEALTH

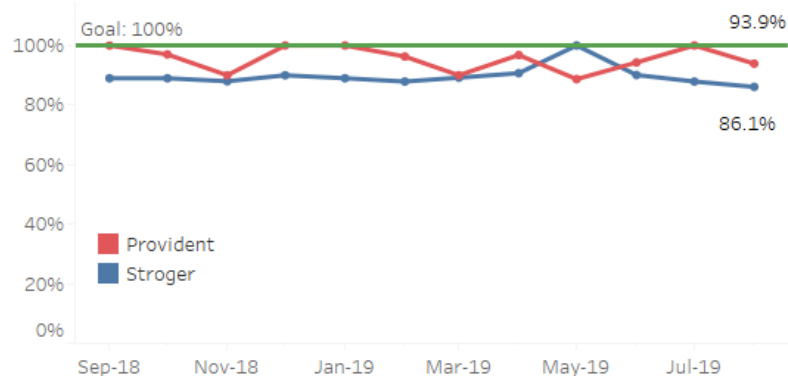
Quality Dashboard  
September 20, 2019

## Health Outcomes

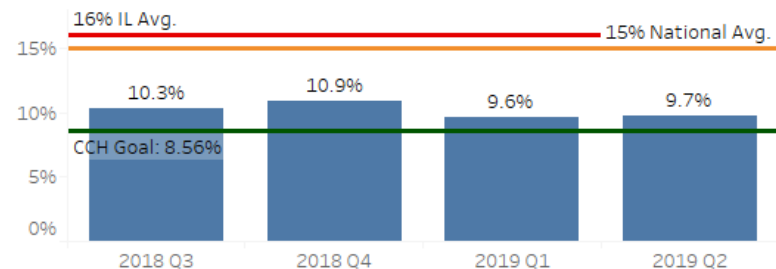
### HEDIS - Diabetes Management: HbA1c < 8%



### Core Measure - Venous Thromboembolism (VTE) Prevention

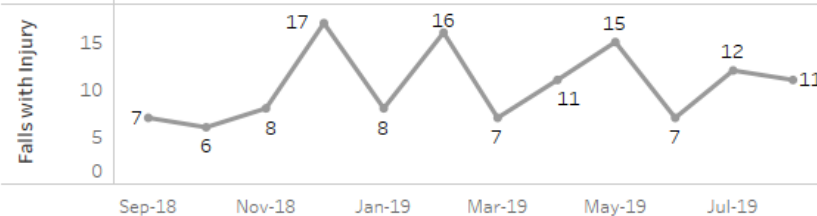
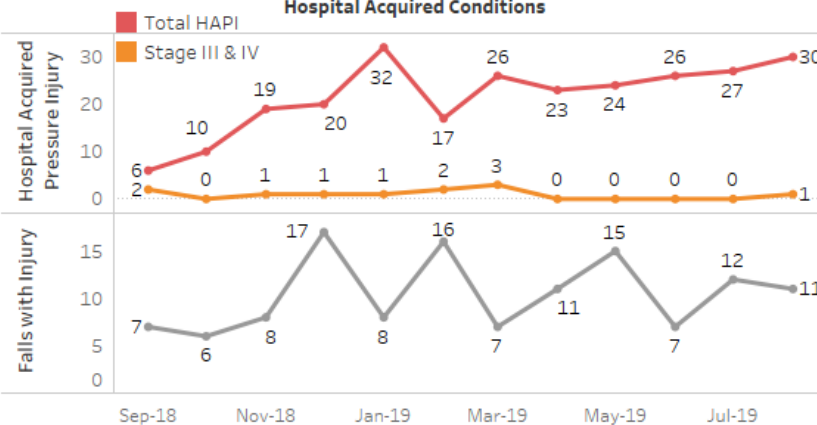


### 30 Day Readmission Rate

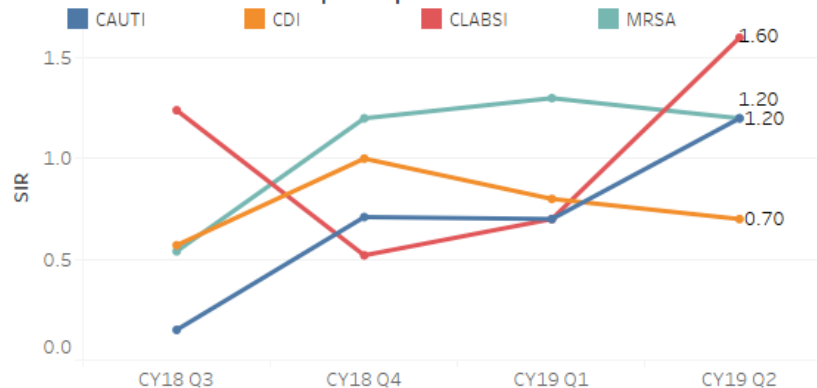


## Patient Safety

### Hospital Acquired Conditions



### Hospital Acquired Infections

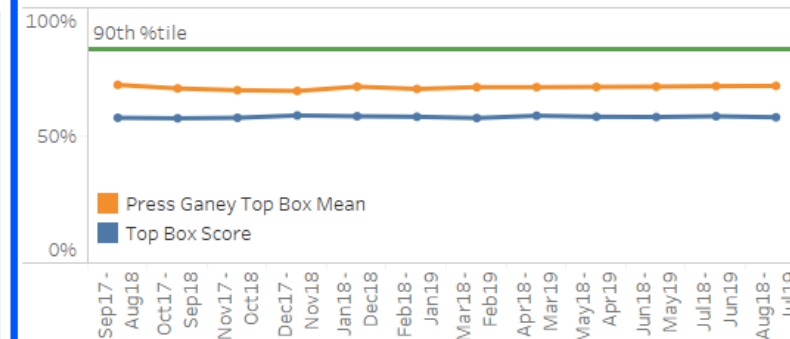


SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAIs were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAIs were observed than predicted.

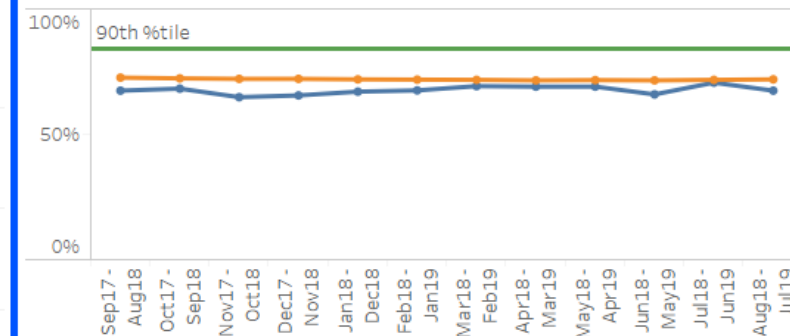
	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19
CAUTI	1	0	0	1	3	1	1	2	1	2	5	6
CDI	4	2	10	4	4	6	2	6	5	4	4	9
CLABSI	3	0	0	0	2	1	0	2	2	2	3	2
MRSA	1	0	0	1	0	1	0	1	0	0	2	0

## Utilization

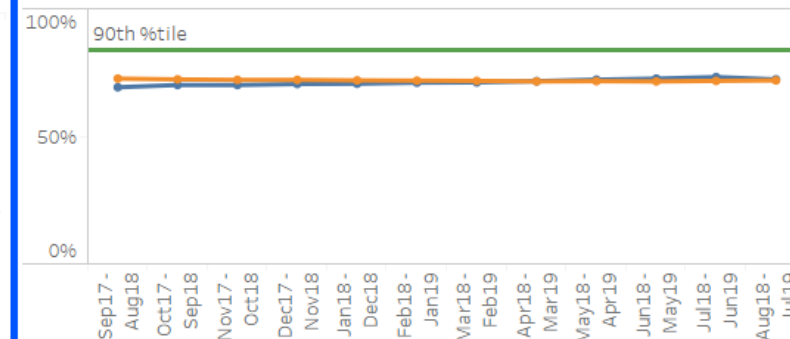
### ACHN--Overall Clinic Assessment



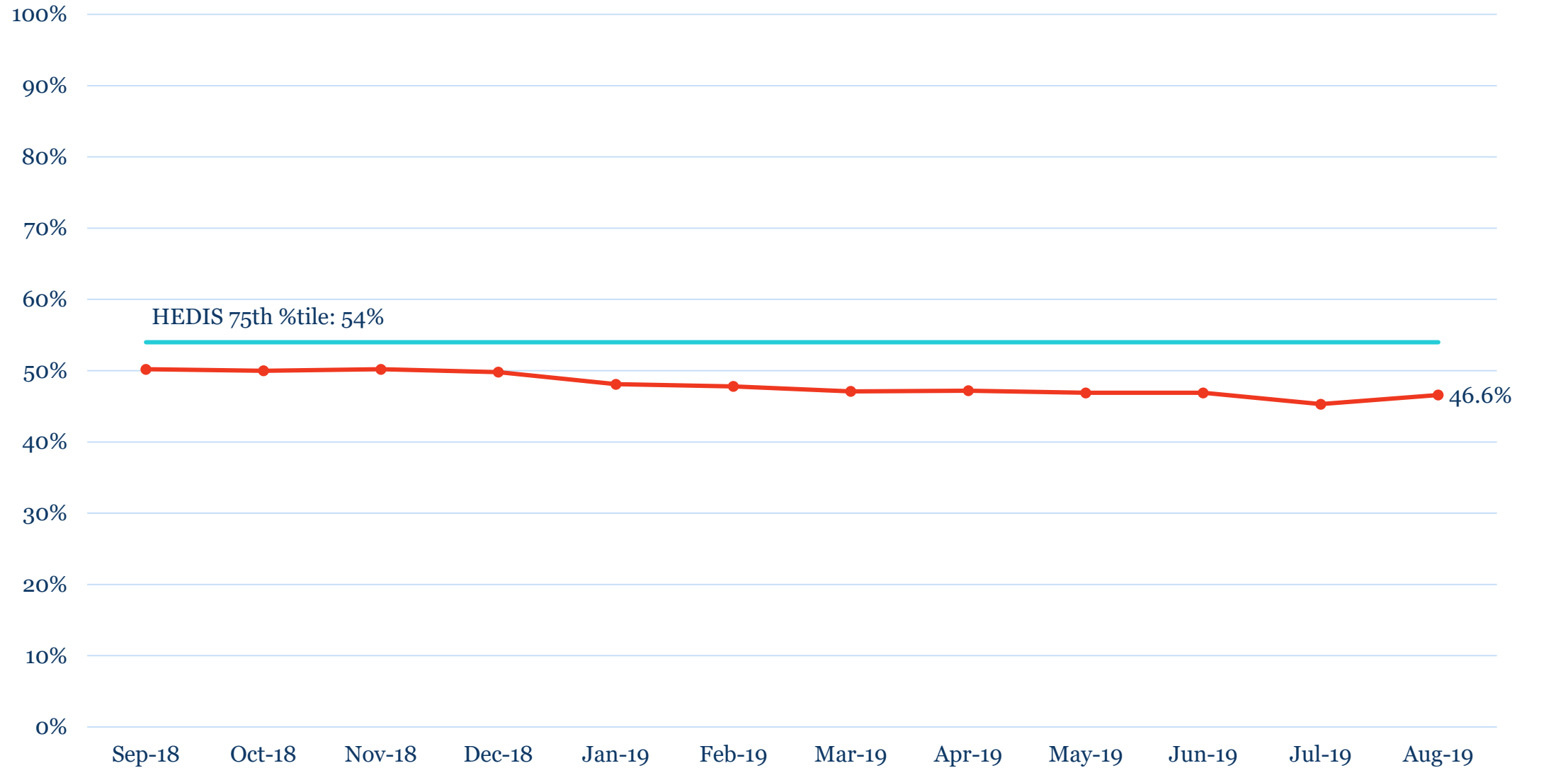
### Provident--Willingness to Recommend Hospital



### Stroger--Willingness to Recommend Hospital

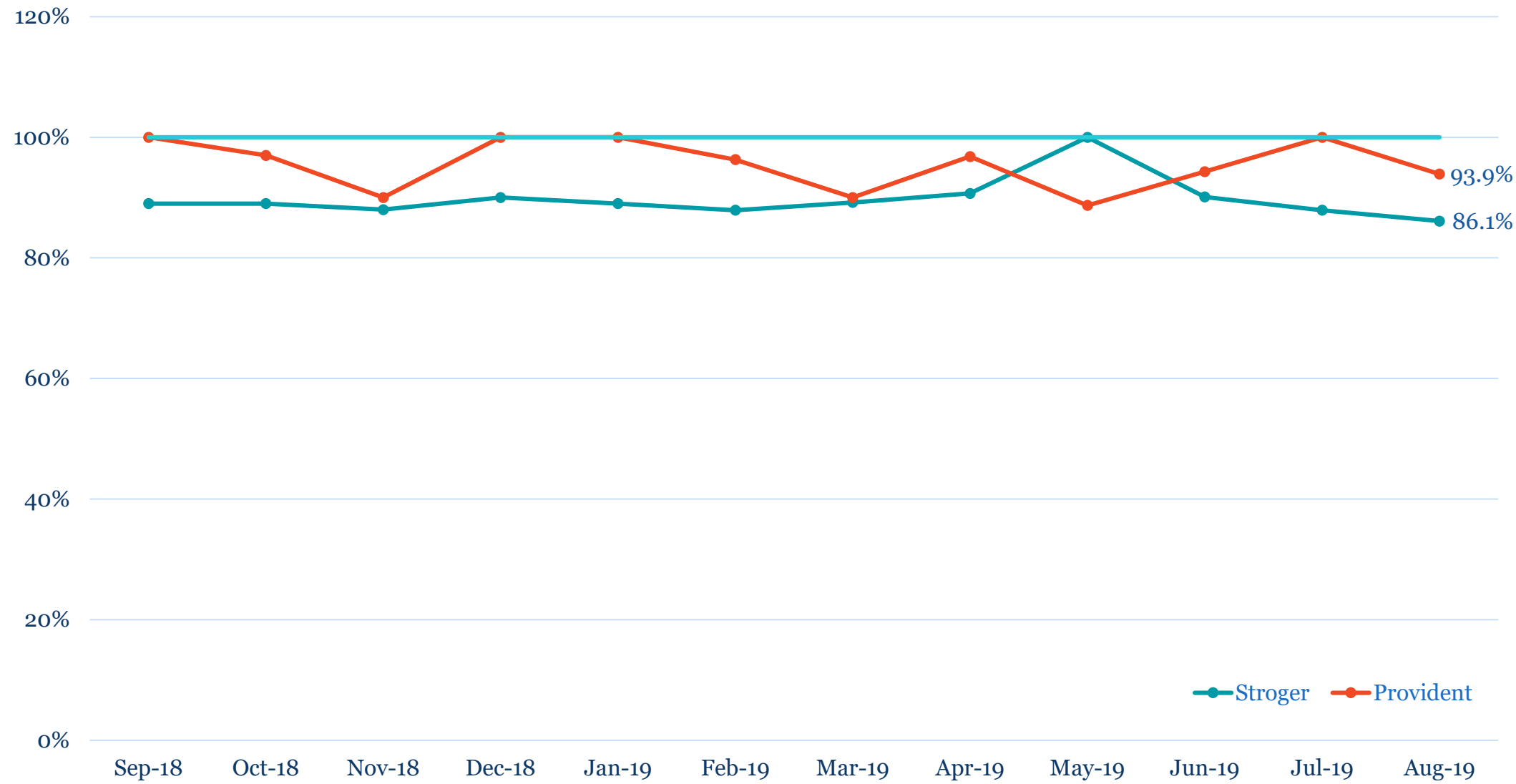


## HEDIS – Diabetes Management: HbA1c < 8%



Source: Business Intelligence

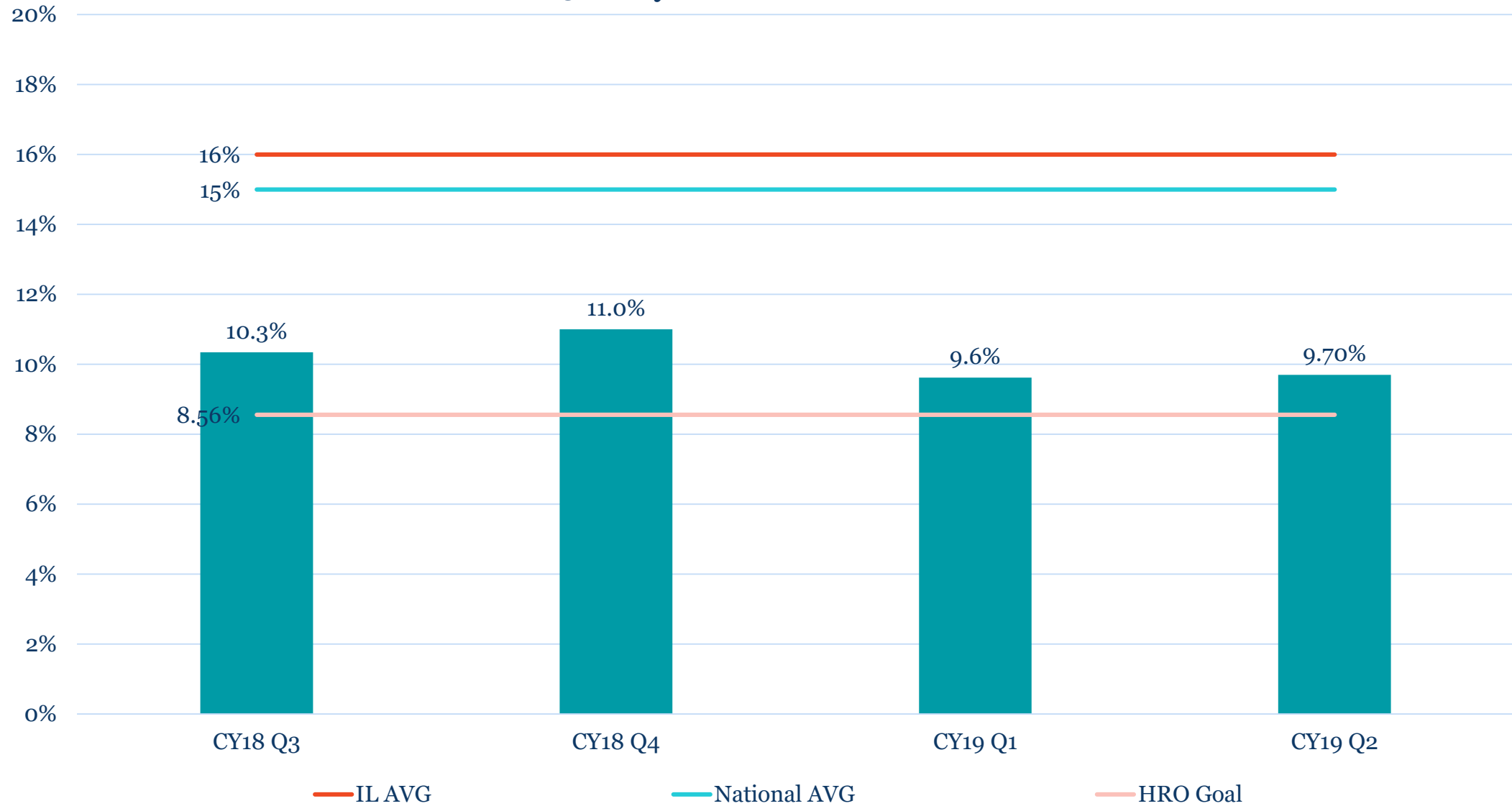
# Core Measure – Venous Thromboembolism (VTE) Prevention



Source: Quality Dept.

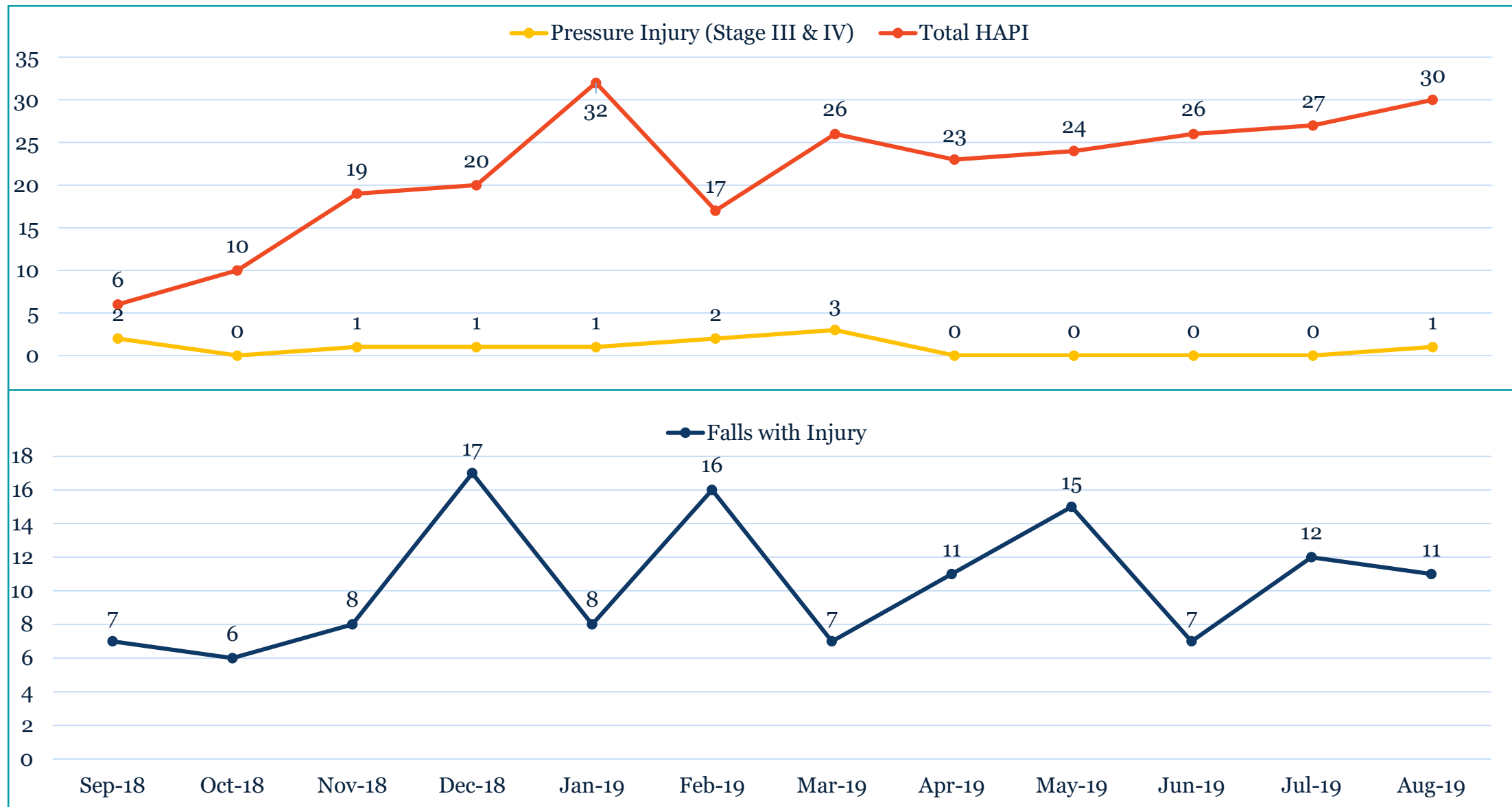


## 30 Day Readmission Rate

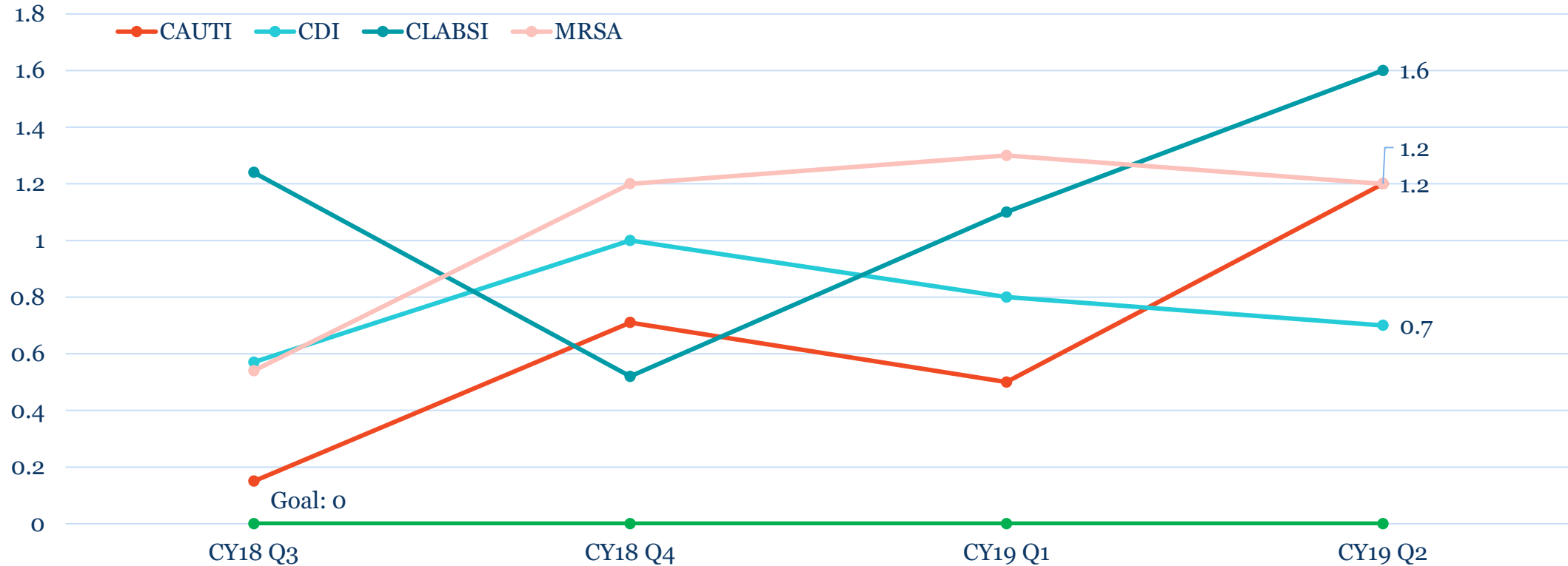


Source: Business Intelligence

## Hospital Acquired Conditions



## Hospital Acquired Infections



	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19
CAUTI	1	0	0	1	3	1	1	2*	1	2*	5	6
CDI	4	2	10	4	4	6	2	6	5	4	4	9
CLABSI	3	0	0	0	2	1	0	2*	2	2	3	2
MRSA	1	0	0	1	0	1	0	1	0	0	2	0

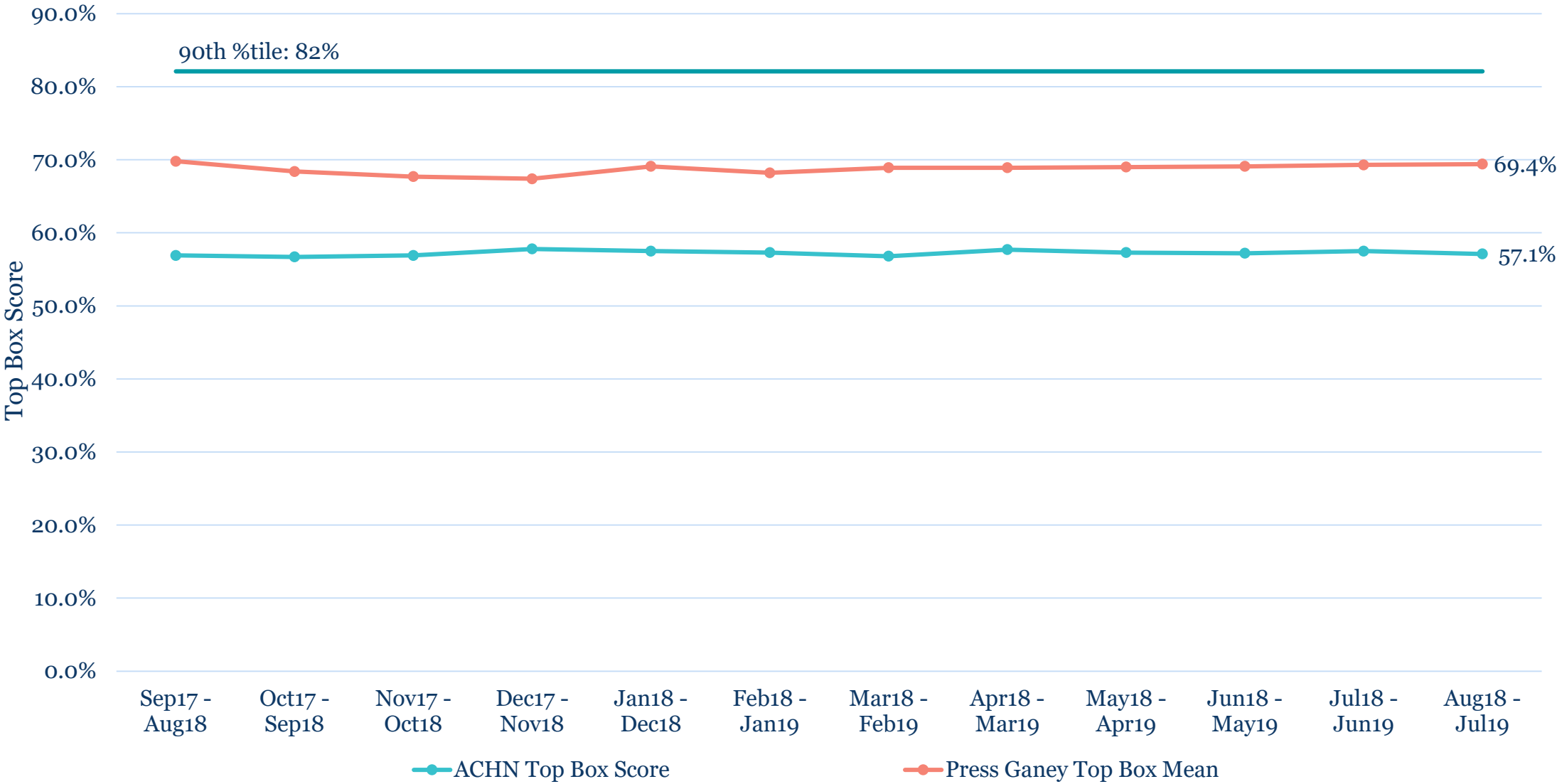
\*Amended

SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAIs were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAIs were observed than predicted.

Source: Infection Control Dept.

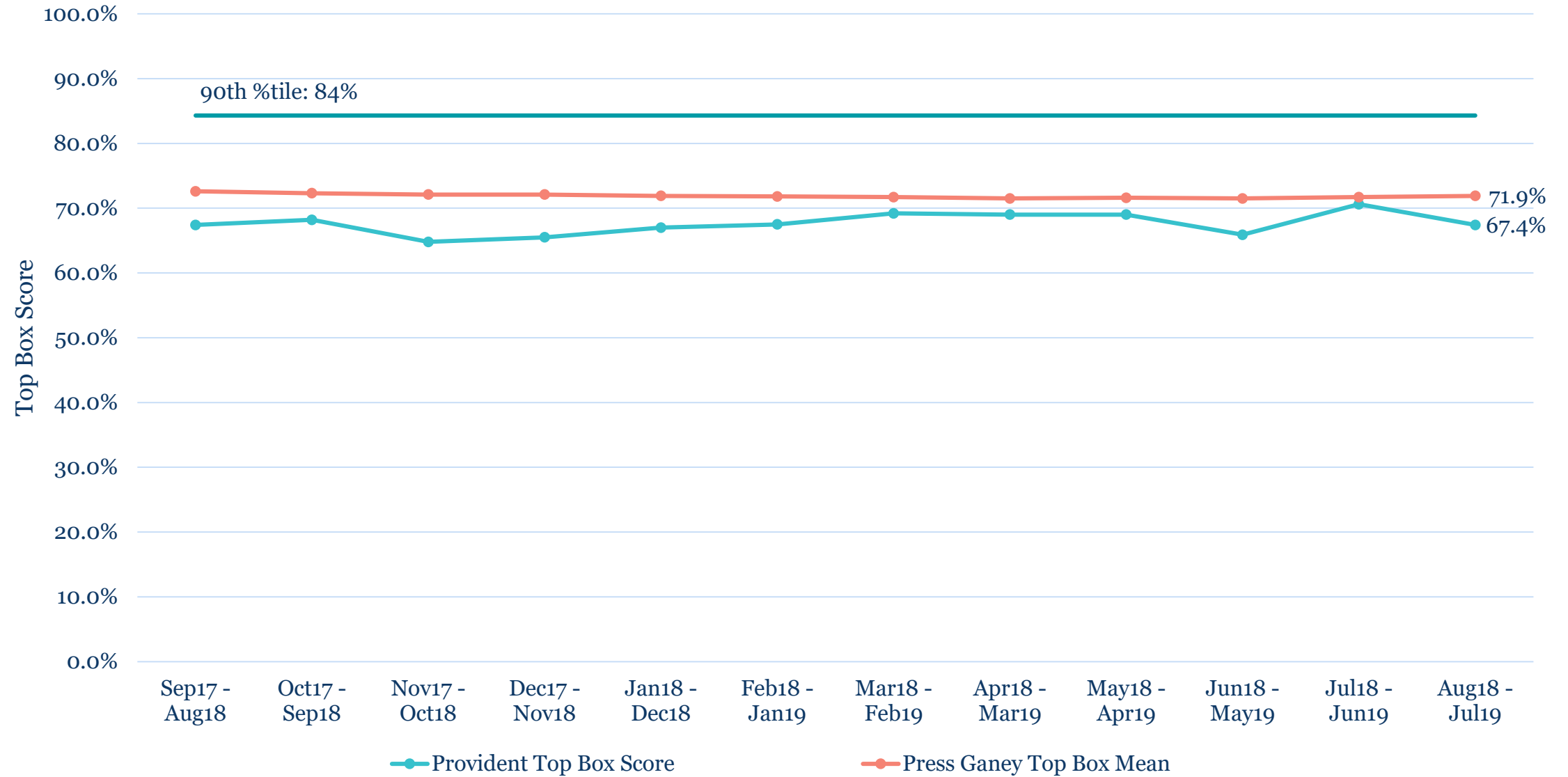


# ACHN – Overall Clinic Assessment

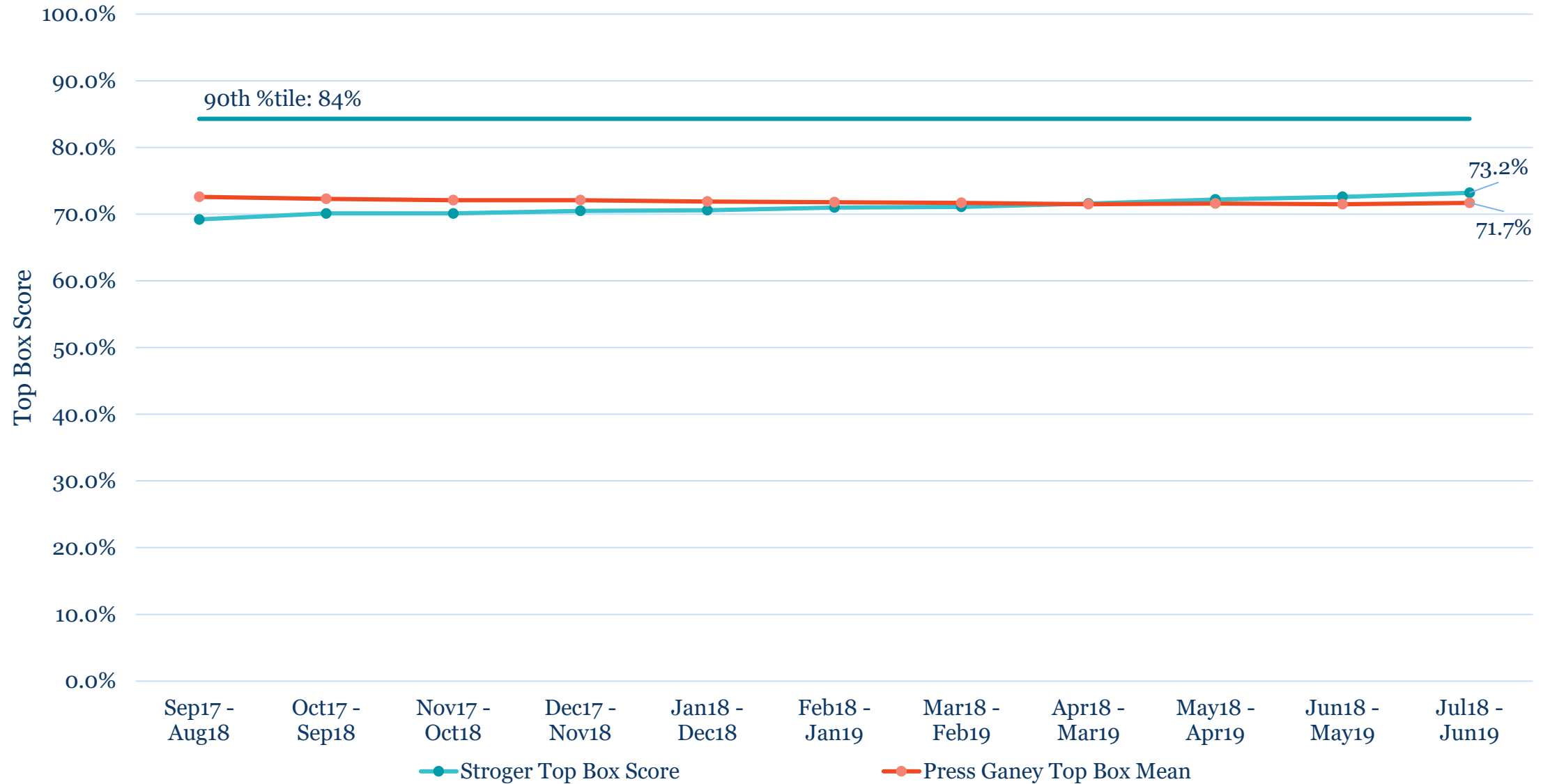


Source: Press Ganey

## Provident – Willingness to Recommend the Hospital



# Stroger – Willingness to Recommend the Hospital



Source: Press Ganey

Cook County Health and Hospitals System  
Quality and Patient Safety Committee Meeting  
September 20, 2019

ATTACHMENT #2

# HRO Workgroup: Clinical Documentation

## Quality and Patient Safety Committee Meeting

Michael Alebich, DO, FACP

Leathecia Arnold, MHA, RHIA, CCS, CHTS-TR

Tara Ruhlen, MPH

20 September 2019





# Background

Inaccurate documentation of patient complexity skews metrics related to length of stay (LOS), risk of mortality (ROM) and patient disease burden

Documentation practices at Cook County Health always reflected our high quality care, but opportunities existed to more accurately reflect our patient complexity

Accurate portrayals of patient complexity improves clinical outcome metrics, quality of care, reimbursement, and aligns with the IMPACT 2020 Strategic Plan

# Background: Documentation and IMPACT 2020

Objective 1.1: Standardize clinical operations, practices and procedures across the System to improve quality, reliability, and efficiency

Objective 3.4: Improve provider documentation to support coding and billing to reflect the level of service provided and the complexity of illness of the patients

# Background: How Documentation Works

- Diagnosis Related Groups (DRGs) created by CMS to simplify the ICD-10 into 740+ groups
- *Most* conditions can be classified into 3 different DRGs (triplet)
- DRGs change with patient comorbidities which are labeled "complications and comorbidities" (CC) and "major complications and co-morbidities" (MCC)

## Example:

Pneumonia in a healthy patient: DRG 195

Pneumonia in a patient with acidosis (CC): DRG 194

Pneumonia in a patient with sepsis (MCC): DRG 193

# Background: Capture Rate

The capture rate is the percentage of discharged patients that have a CC or MCC as compared with the base DRG

Example:

100 patients are discharged with pneumonia (base DRG 195)

60 had a CC or MCC "captured" in the documentation

60 pts with CC or MCC

$$\text{Capture rate} = \frac{60 \text{ pts with CC or MCC}}{100 \text{ pts total with pneumonia}} = 60\%$$

# Background: Case Mix Index

- Each DRG is assigned a relative weight by CMS
- Imparts complexity, resource use, length of stay and reimbursement
- The case mix index (CMI) is the average relative weight for all discharged patients

## Example

Normal newborn (DRG 795) : 0.18

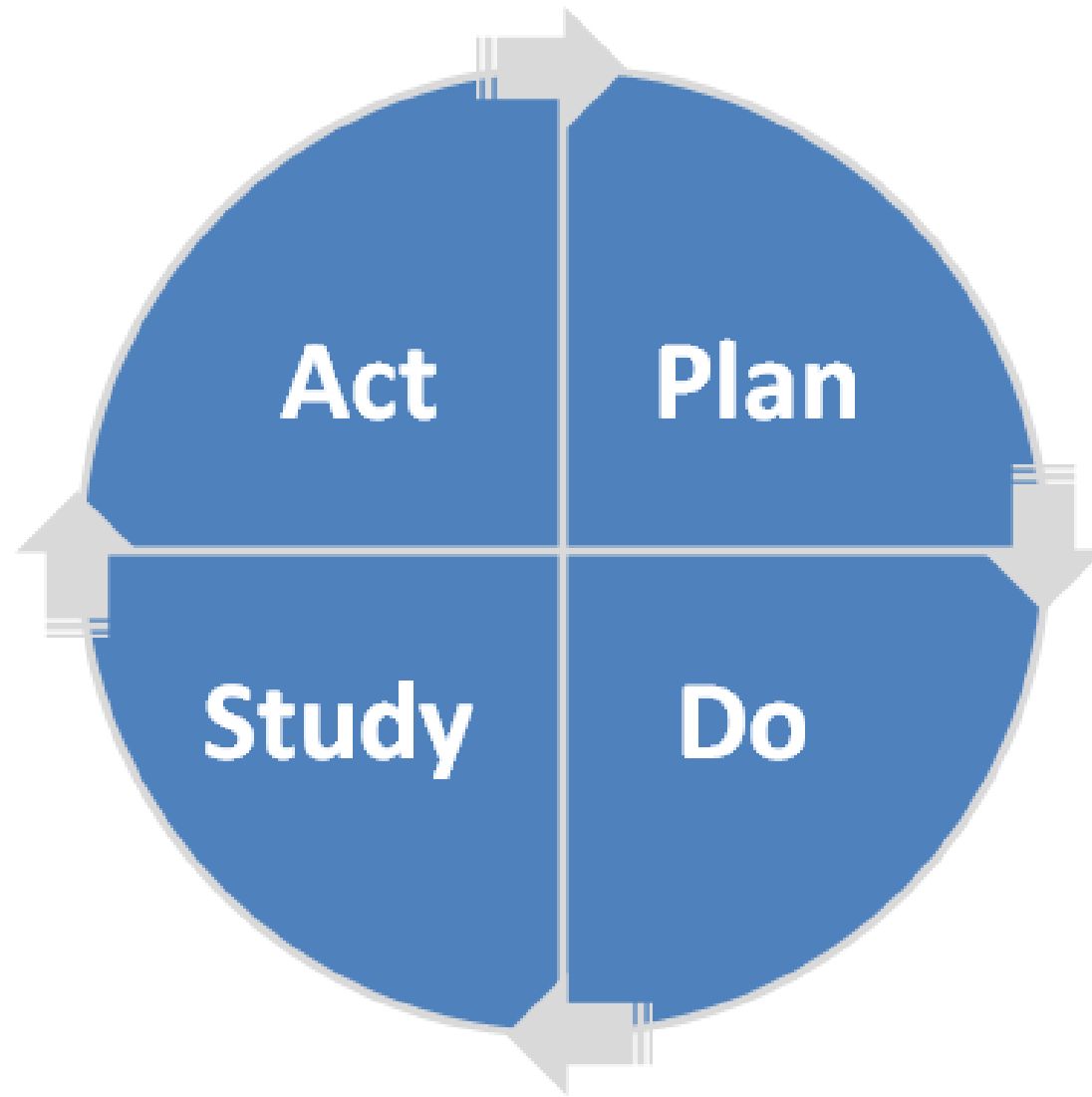
Pneumonia w/o CC or MCC (DRG 195) : 0.68

Pneumonia w/ MCC (DRG 193) : 1.31

Heart transplant with MCC (DRG 001) : 26.41

# Aim Statement

- We seek to improve our institutional CMI with a system-wide educational effort focused on divisional didactics and training supported by software-driven identification of improvement opportunities in real time.
  - Surgical CMI target May 2020: 3.1 (baseline 2.4)
  - Medical CMI target May 2020: 1.3 (baseline 0.98)
  - System-wide capture rate May 2020: 75% (baseline 45%)



# Plan





# Plan

1. Recruit physician leaders from each division with admitting privileges to act as “documentation champions”
2. Assist “documentation champions” in crafting and distributing documentation educational sessions to attendings and house staff (train the trainer)
3. Utilize the clinical documentation team in conjunction with software to identify documentation shortfalls and suggest real-time alternatives

# Do



# Do

Division	Champion
Internal Medicine	Michael Alebich, DO
General Surgery	Jacqueline Harrison, MD
Family Medicine	Tom Sweder, MD
Medical Critical Care	Shashvat Sukhal, MD
Surgical Critical Care	Alex Sauper, MD
Cardiology	Tareq Alyousef, MD
Thoracic Surgery	Ozuru Ukoha, MD
Neurosurgery	Patricia Raksin, MD
Infectious Diseases Inpatient	Vanessa Sarda, MD
Vascular Surgery	Erin Farlow, MD
OB/GYN	Megan App, MD

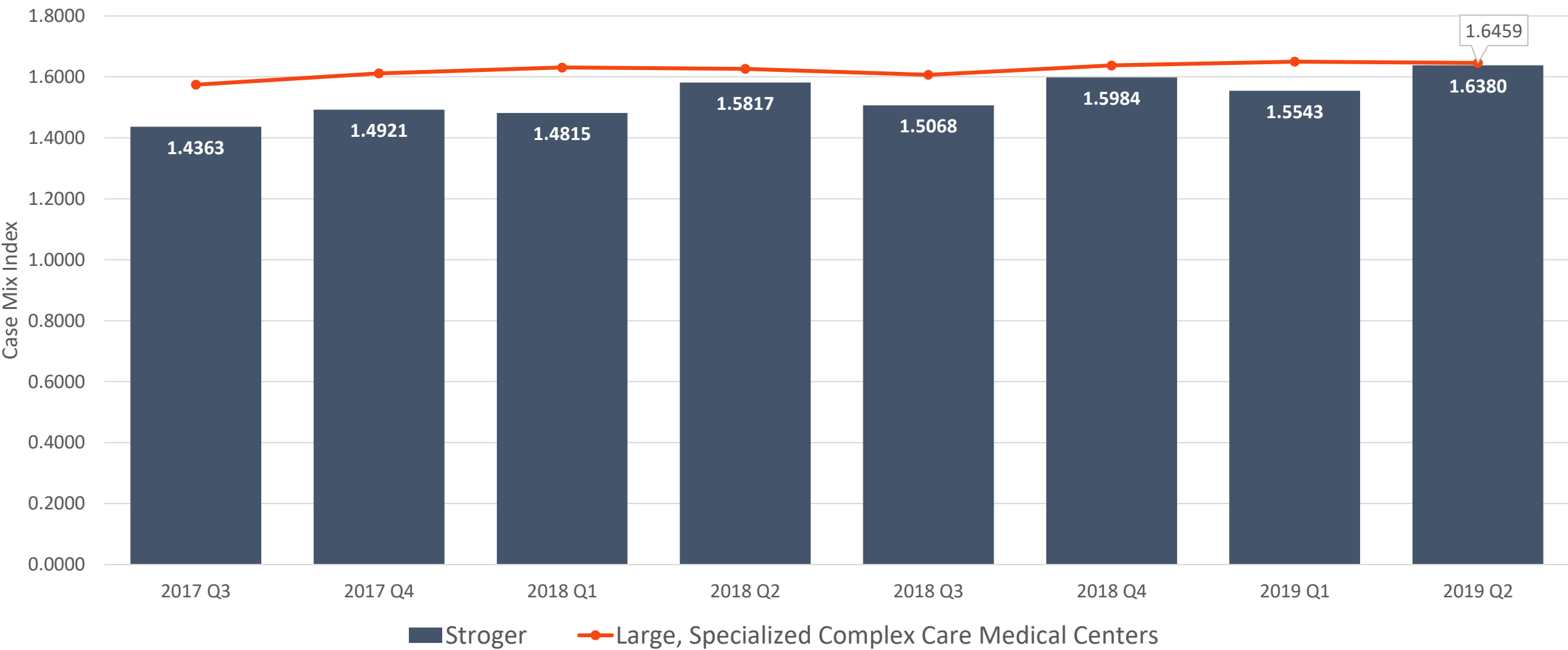
# Study



# Case Mix Index

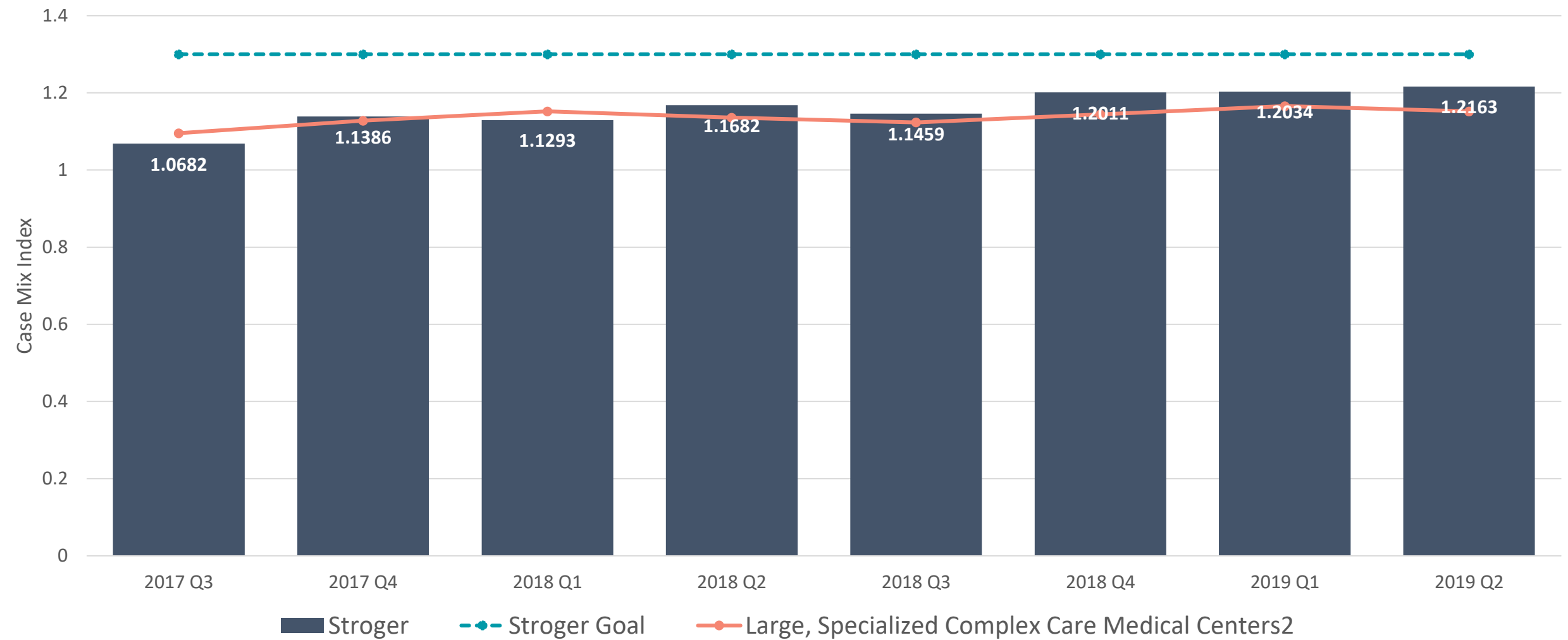
All Cases

Case Mix Index at Stroger  
**14.0% increase** from 2017 Q3 to 2019 Q2  
*\*4.5% in similar hospitals*



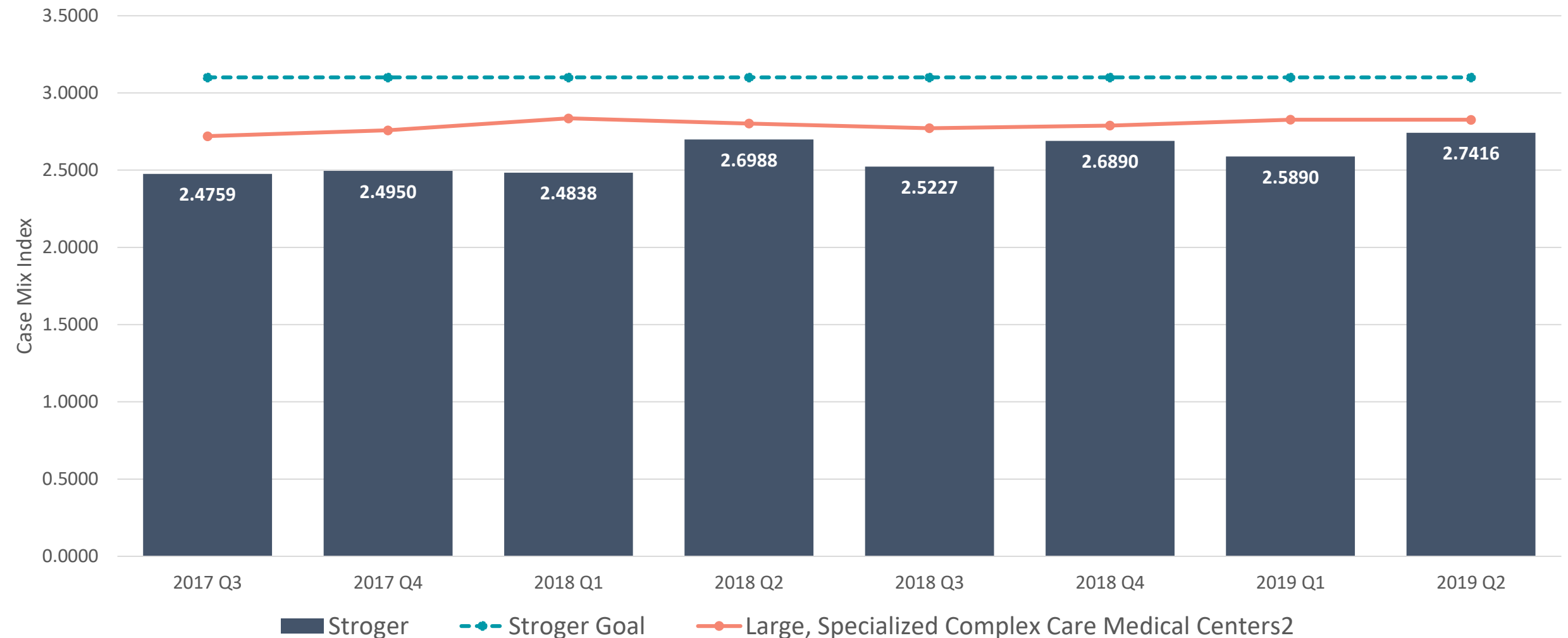
# Case Mix Index

## Medical MS-DRG

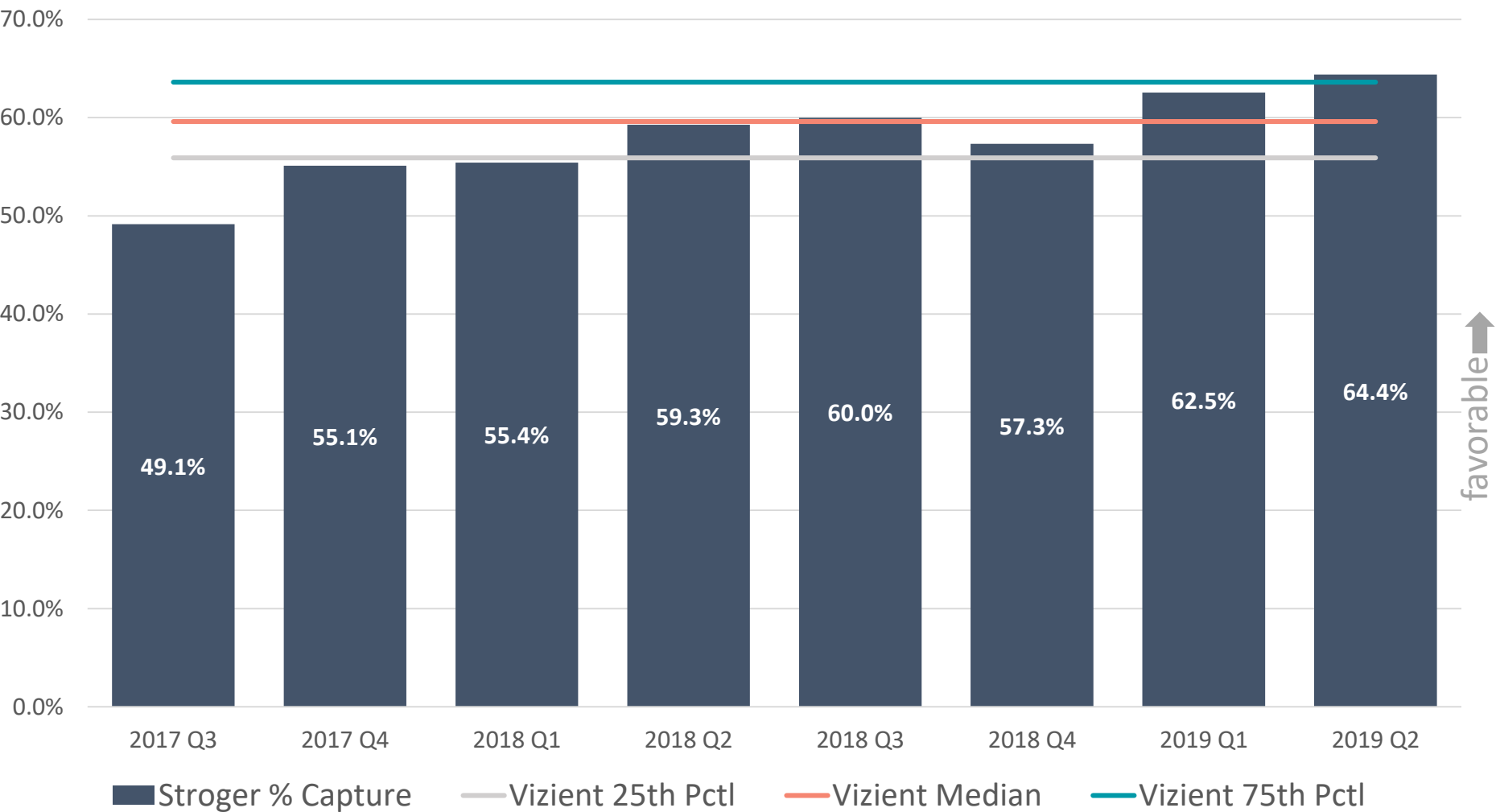


# Case Mix Index

## Surgical MS-DRG



# Medical CC/MCC Capture



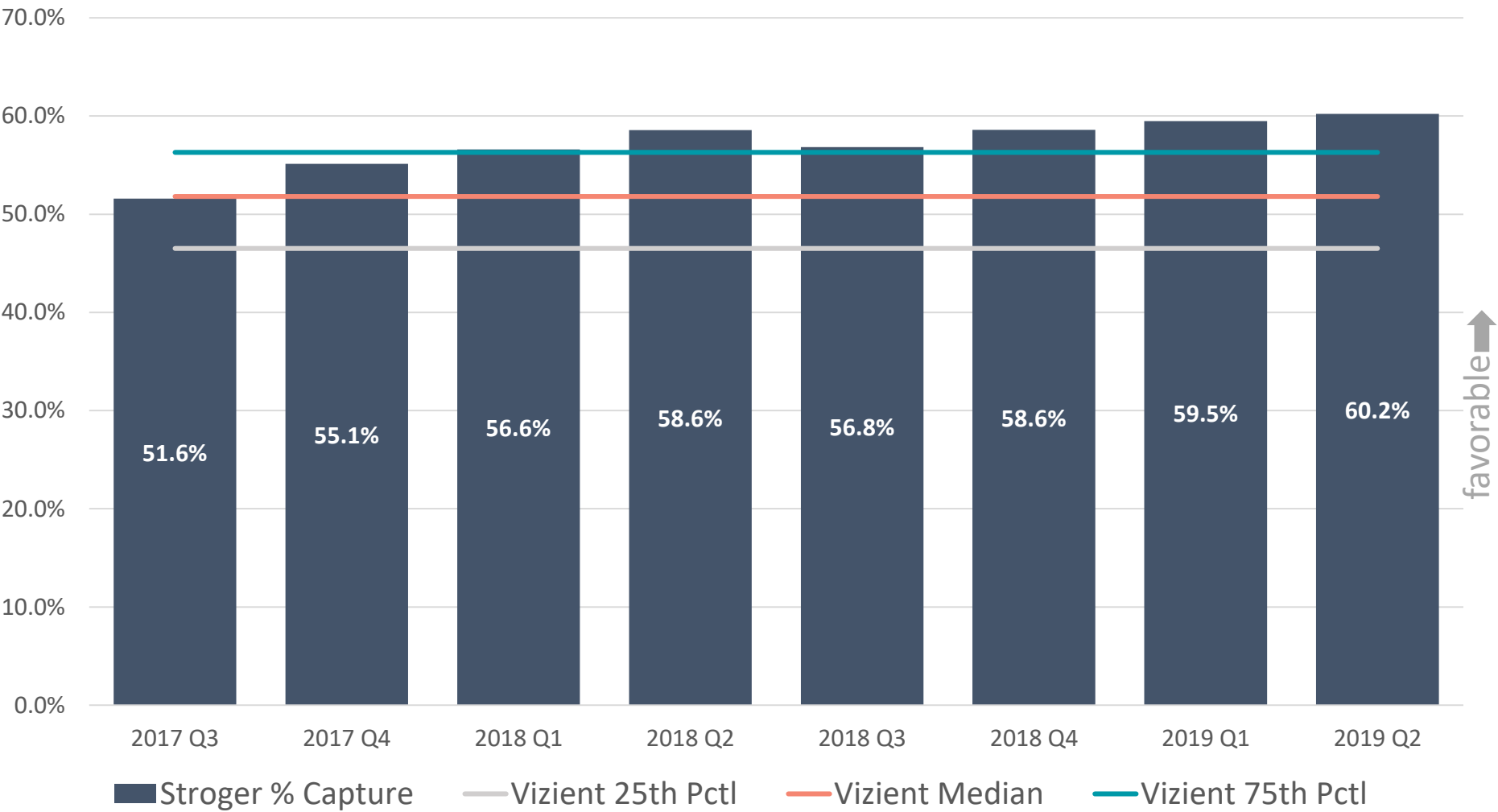
Vizient Baseline (2018Q2-2019Q1)	
Total	59.3%
Mean	59.5%
Minimum	48.3%
25 <sup>th</sup> Percentile	55.9%
50 <sup>th</sup> Percentile	59.6%
75 <sup>th</sup> Percentile	63.6%
Maximum	73.2%
HIGHER IS BETTER	

2019 Q2=  
64.4%





# Surgical CC/MCC Capture



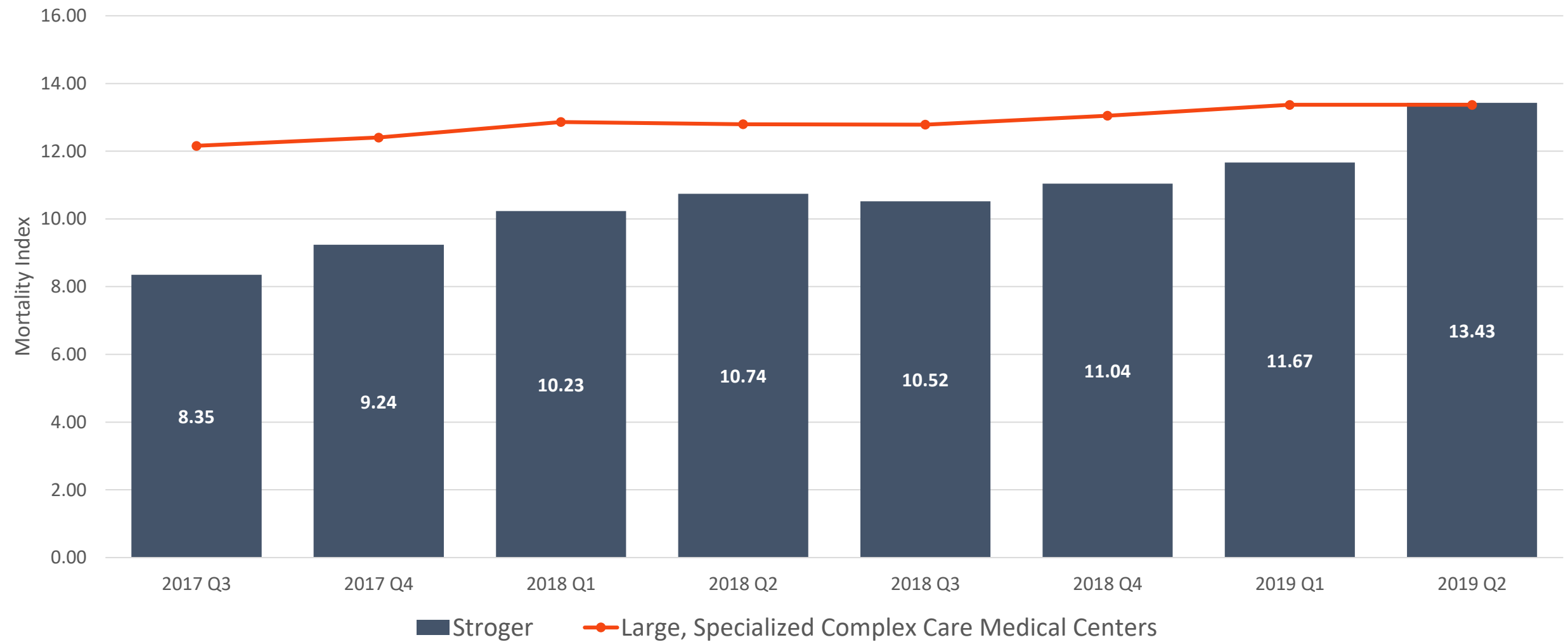
Vizient Baseline (2018Q2-2019Q1)	
Total	51.4%
Mean	51.7%
Minimum	33.6%
25 <sup>th</sup> Percentile	46.5%
50 <sup>th</sup> Percentile	51.8%
75 <sup>th</sup> Percentile	56.3%
Maximum	73.5%
HIGHER IS BETTER	

2019 Q2 =  
60.2%

# Mean Diagnosis Codes per Case

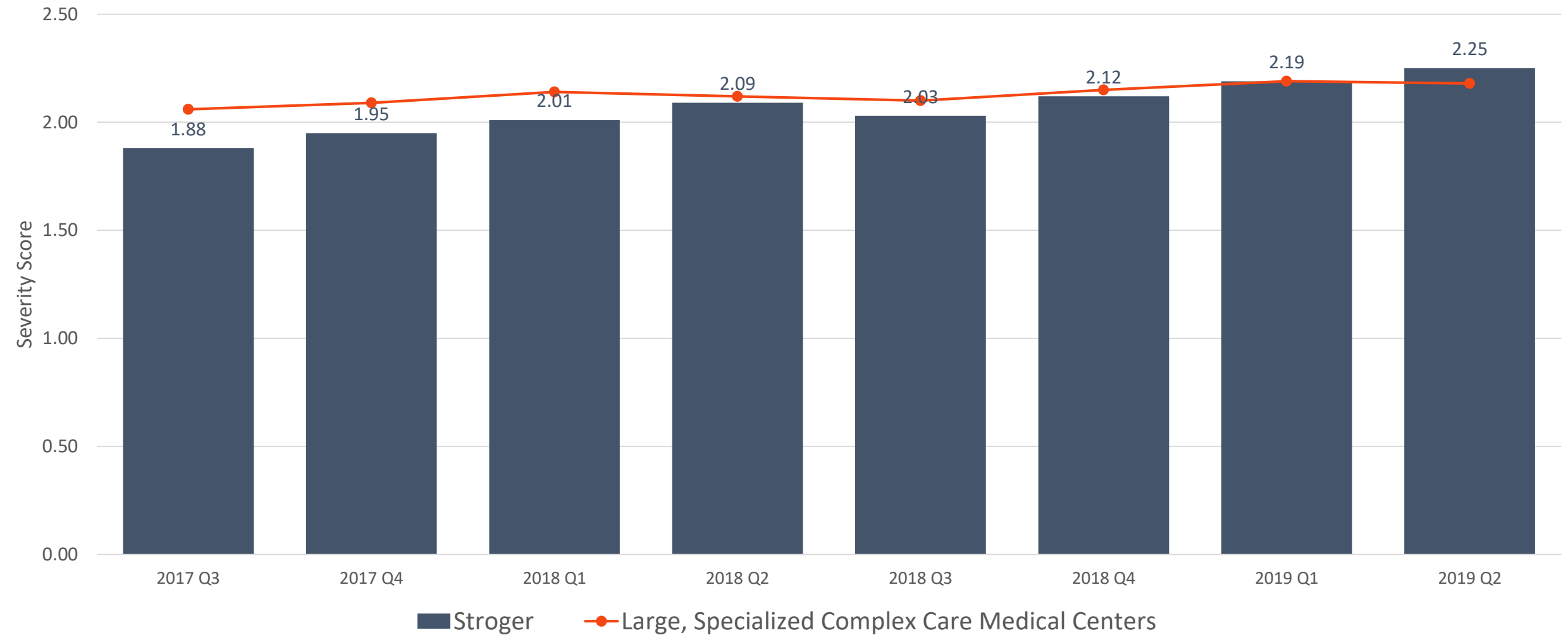
Comparison to Similar Hospitals in Vizient

Mean Dx Codes at Stroger  
**60.8% increase** from 2017 Q3 to 2019 Q2  
*\*9.9% in similar hospitals*



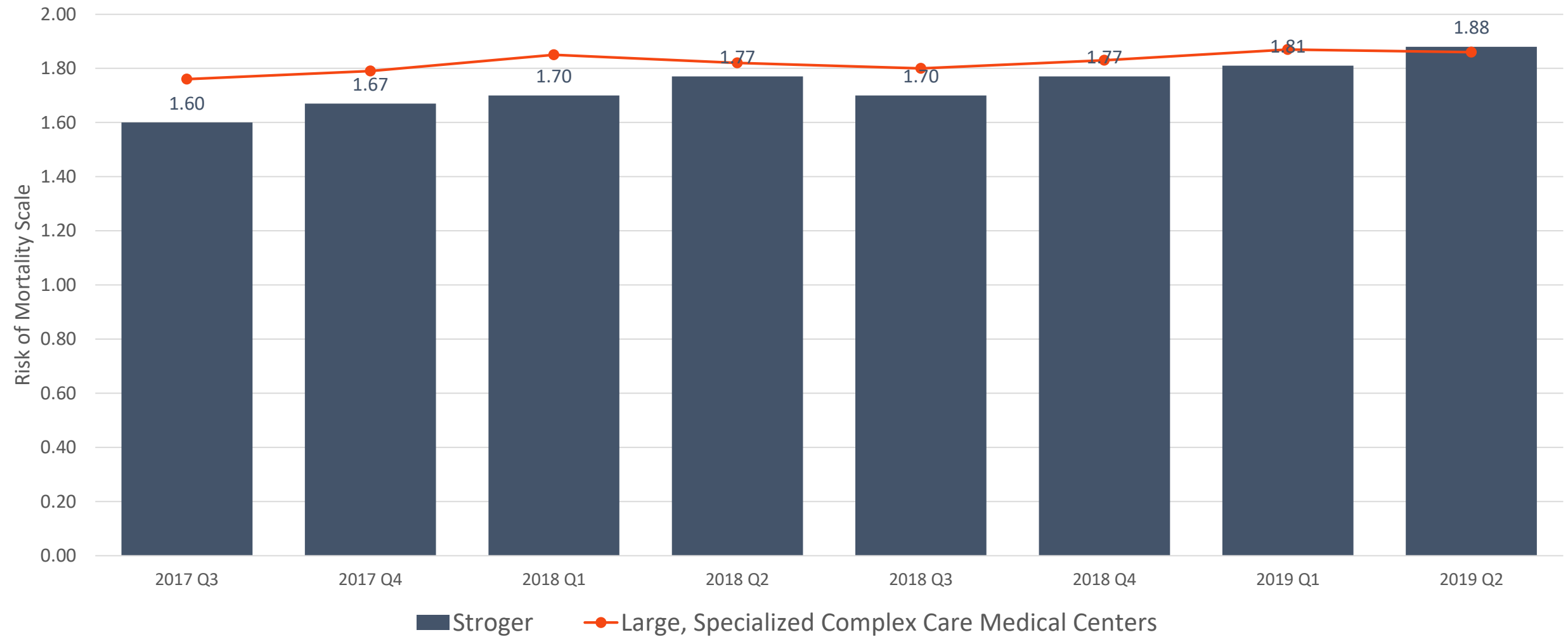
# Severity of Illness

## Overall



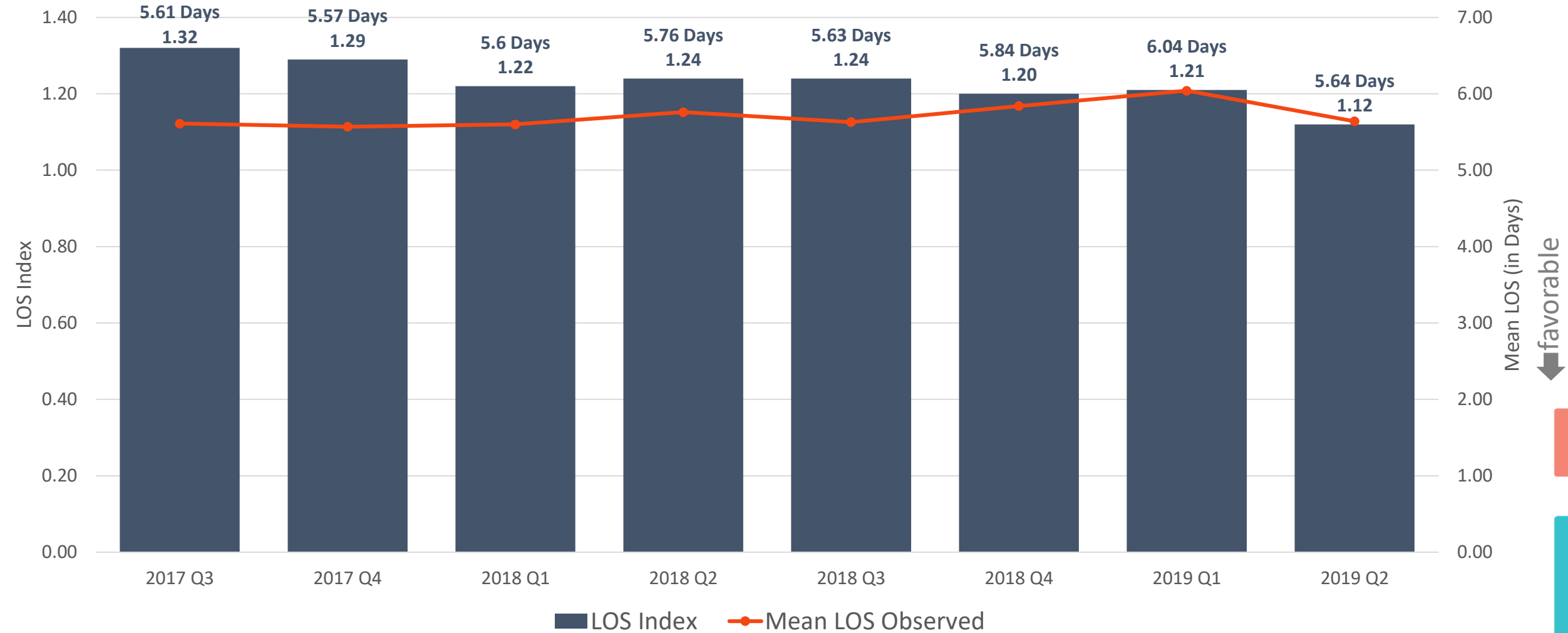
# Risk of Mortality

## Overall

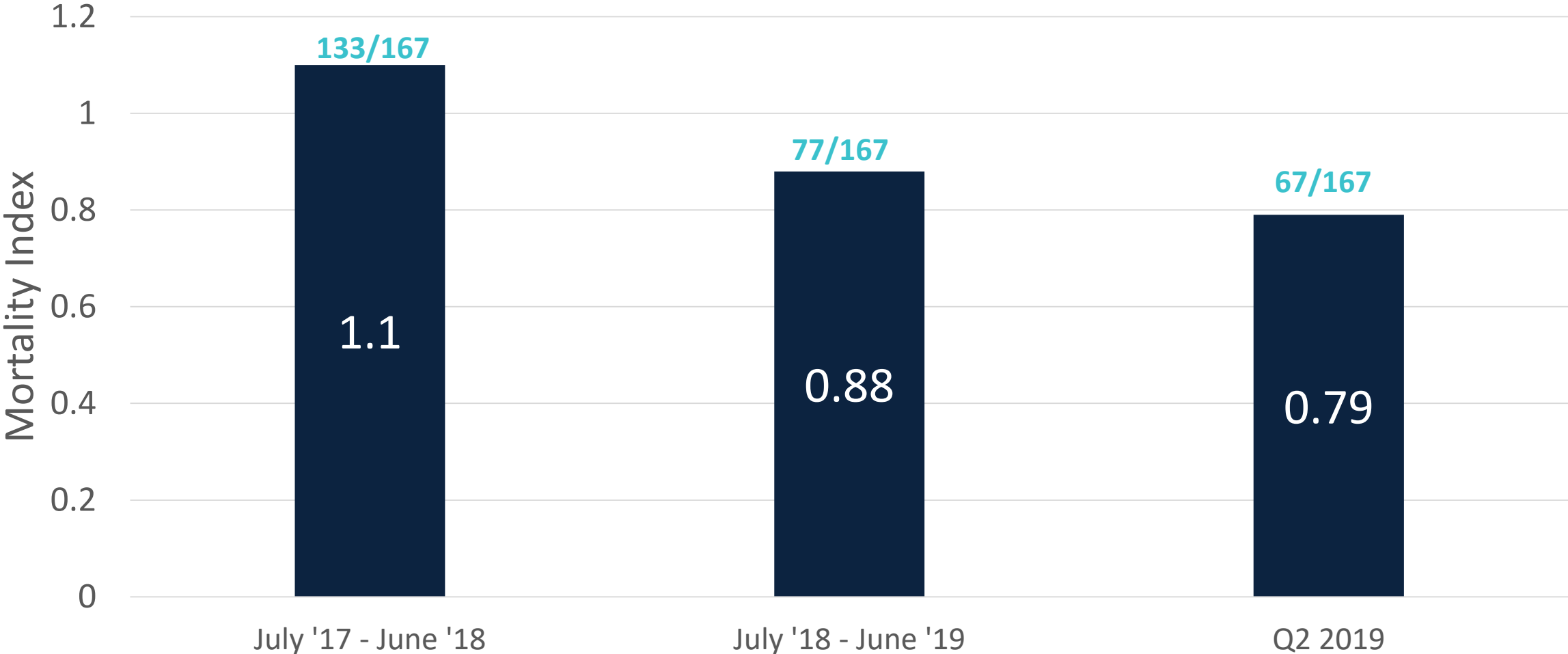


# Length of Stay Index

## LOS Index and Mean LOS (in Days)



# Mortality Index and Hospital Ranking



# Study Summary

## Lessons Learned

- Major progress made with medical DRGs, with further work now focused on identifying more nuanced lapses in documentation rather than “low hanging fruit”
- Surgical DRG improvement relies on continued educational efforts (surgical house staff mostly rotators and thus more logistically challenging) and collaboration with medical consultants to capture medical complexity
- Real time examples necessary to train those not well-versed in this relatively new domain

# Act

Continued tracking of data

Continued education of new hires

Intensified focus on surgical DRGs







# Thank You

Questions?



COOK COUNTY  
**HEALTH**

Cook County Health and Hospitals System  
Quality and Patient Safety Committee Meeting  
September 20, 2019

ATTACHMENT #3



**COOK COUNTY  
HEALTH**

Toni Preckwinkle  
President, Cook County Board of Commissioners  
John Jay Shannon, MD  
Chief Executive Officer, Cook County Health

Deb Santana  
Secretary to the Board  
Cook County Health

Date: September 12, 2019

Dear Members of the Quality and Patient Safety Committee of  
the CCH Board,

The Executive Medical Staff Committee of John H. Stroger Jr.,  
Hospital of Cook County, approved the attached list of medical  
staff action items Tuesday, September 10, 2019, for your  
consideration. Thank you.

Respectfully Submitted,

Trevor Lewis, MD  
President, Executive Medical Staff

# John H. Stroger, Jr. Hospital of Cook County



**TO:** Quality and Patient Safety Committee

**FROM:** Trevor Lewis, MD  
EMS President

**SUBJECT:** Medical Staff Appointments and Other Business Recommended by the **Executive Medical Staff Committee**.

Medical Staff Appointments/Reappointments Effective September 20, 2019 Subject to Approval by the CCH Quality and Patient Safety Committee.

## Initial Physician Appointment Applications:

Name	Category	Department / Division	Appointment Term
Adams-Winn, Carolyn DDS	Active	Oral Health	September 20, 2019 through September 19, 2021
Chennuri, Rohini MD	Active	Pathology	September 20, 2019 through September 19, 2021
Dudani, Rajesh MD	Active	Pediatrics/ Neonatology	September 20, 2019 through September 19, 2021
Emuchay, Ngozi, MD	Active	Medicine/General Medicine	September 20, 2019 through September 19, 2021
Forte Berauer, Tiffany MD	Active	Family Medicine	September 20, 2019 through September 19, 2021
Gans, Rhonda Y., MD	Active	Family Medicine	September 20, 2019 through September 19, 2021
Huq, Sabrina DO	Active	Pediatrics	September 20, 2019 through September 19, 2021
Mosley, Katrina DDS	Active	Oral Health	September 20, 2019 through September 19, 2021
Rifkin, Shelby, D., MD	Consulting	Medicine/Hematology/Oncology	September 20, 2019 through September 19, 2021
Patel, Dipika MD	Active	Pediatrics/Allergy Immunology	September 20, 2019 through September 19, 2021
Prinz, Richard A., MD	Consulting	Surgery/General Surgery	September 20, 2019 through September 19, 2021

CCHHS

**APPROVED**

BY THE QUALITY AND PATIENT SAFETY COMMITTEE  
ON SEPTEMBER 20, 2019

### Reappointment Applications:

Department of Anesthesiology:			
Name	Category	Division	Reappointment Term
Franco, Carlo D., MD	Active	Anesthesiology	January 28, 2020 through January 27, 2022

Department of Correctional Health :			
Name	Category	Division	Reappointment Term
DeFuniak, Andrew MD	Active	Correctional Health/Med Surg	November 18, 2019 through November 17, 2021
Ahmad, Wakas DO	Active	Correctional Health/Med Surg	December 8, 2019 through December 7, 2021

Department of Emergency Medicine:			
Name	Category	Division	Reappointment Term
Straus, Helen, MD	Active	Emergency Medicine	December 16, 2019 through December 15, 2021

Department of Medicine			
Name	Category	Division	Reappointment Term
Bodnar, Ulana, MD	Voluntary	Infectious Disease	December 21, 2019 through December 20, 2021
Chataut, Chandra P., MD	Active	Hospital Medicine	December 21, 2019 through December 20, 2021
Go, Benjamin, MD	Active	Gastroenterology	December 30, 2019 through December 29, 2021
Grennan, Dara, MD	Active	Infectious Disease	October 20, 2019 through October 19, 2021
Huhn, Gregory, MD	Active	Infectious Disease	December 8, 2019 through December 7, 2021
Mullane, Michael, MD	Active	Hematology/Oncology	December 30, 2019 through December 29, 2021
Riles, William, MD	Active	Gastroenterology	December 8, 2019 through December 7, 2021

Department of Pathology:			
Name	Category	Division	Reappointment Term
Niklinski, Waldemar MD	Active		November 20, 2019 through November 19, 2021

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ON SEPTEMBER 20, 2019

**Department of Pediatrics:**

Name	Category	Division	Reappointment Term
Bhobe, Swati MD	Active		December 30, 2019 through December 29, 2021
Budhani, Shaaista MD	Consulting	Neonatology	November 13, 2019 through November 12, 2021
Enger, Minyuen, MD	Active	Neonatology	November 15, 2019 through November 14, 2021
Fujara, Marjorie MD	Active		November 16, 2019 through November 15, 2021
Henry-Reid, Lisa MD	Active	Adolescent Med	November 15, 2019 through November 14, 2021
Walton-Verner, Kimberly MD	Active		October 20, 2019 through October 19, 2021

**Department of Psychiatry:**

Name	Category	Division	Reappointment Term
Tachauer, Alessandra	Active	Psychiatry	November 20, 2019 through November 19, 2021

**Department of Surgery:**

Name	Category	Division	Reappointment Term
Lobe, Thom E., MD	Active	Pediatric Surgery	October 20, 2019 through October 19, 2021
Mantilla Farfan, Nathalie, MD	Active	Colon/Rectal	December 08, 2019 through December 07, 2021

**Department of Trauma:**

Name	Category	Division	Reappointment Term
McCarthy, Theresa DO	Active	Rehabilitation Medicine	October 28, 2019 through October 27, 2021

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**Medical Staff Request for Additional Privileges:**

Name	Department/ Division	Additional Privileges
Ahmed, Fazal MD	Psychiatry	Telepsychiatry
Conrin, Sean MD	Psychiatry	Telepsychiatry
Hall-Ngorima, Regina MD	Psychiatry	Telepsychiatry
Khattak, Samina MD	Psychiatry	Telepsychiatry
Kumari, Sonali MD	Psychiatry	Telepsychiatry
Matek, Deborah MD	Psychiatry	Telepsychiatry
Moreno, Michael MD	Psychiatry	Telepsychiatry
Solari, Hugo MD	Psychiatry	Telepsychiatry
Tachauer, Alessandra MD	Psychiatry	Telepsychiatry

CCHHS

**APPROVED**

BY THE QUALITY AND PATIENT SAFETY COMMITTEE  
ON SEPTEMBER 20, 2019



**Initial Application for Non-Medical Staff:**

Name	Category	Department/ Division	Appointment Term
Edwards, Carla L.Ac	Acupuncturist	Anesthesiology	September 20, 2019 through September 19, 2021

**Renewal of Privileges for Non-Medical Staff:**

Name	Category	Department/ Division	Appointment Term
Ahmed, Sarah CRNA	Nurse Anesthetist	Anesthesiology	December 16, 2019 through December 15, 2021
Barchfeld, Rebecca L., CRNA	Nurse Anesthetist	Anesthesiology/Pain Management	November 20, 2019 through November 19, 2021
Colon, Alina PA-C	Physician Assistant	Correctional Health/Med Surg	December 8, 2019 through December 7, 2021
Chung, Gina PA-C	Physician Assistant	Correctional Health/Med Surg	December 8, 2019 through December 7, 2021
Duda, Jane CRNA	Nurse Anesthetist	Anesthesiology	October 20, 2019 through October 19, 2021
Holden, M. Christine, PA-C	Physician Assistant	Medicine/General Medicine/Breast Oncology	October 20, 2019 through October 19, 2021
Kanumury, Ratna, PA-C	Physician Assistant	Medicine/General Medicine	October 20, 2019 through October 19, 2021
Miranda-Ocasio, Harry PsyD	Clinical Psychologist	Psychiatry	November 10, 2019 through November 9, 2021
Schoen, Alison PA-C	Physician Assistant	Correctional Health/Med Surg	December 16, 2019 through December 15, 2021
Uddin, Farhana F., PA-C	Physician Assistant	Surgery/Urology	December 29, 2019 through December 28, 2021
Voll, Sarah, CNP	Nurse Practitioner	Medicine/Cardiology	December 8, 2019 through December 7, 2021
Warden-Thomas, Karin A., CNP	Nurse Practitioner	Medicine/General Medicine	October 20, 2019 through October 19, 2021
Wright, LaDonna D., PA-C	Physician Assistant	Medicine/Dermatology	September 20, 2019 through September 19, 2021

**Non-Medical Staff Request for Agreement Changes/Additional Privileges:**

Name	Department/ Division	Additional Privileges
Megchelsen, Rebecca PA-C	Pediatrics	Prescriptive Authority
Peculis, James F., PA-C	Surgery/Urology	Prescriptive Authority

CCHHS

**APPROVED**

BY THE QUALITY AND PATIENT SAFETY COMMITTEE  
ON SEPTEMBER 20, 2019



Toni Preckwinkle  
President, Cook County Board of Commissioners  
John Jay Shannon, MD  
Chief Executive Officer, Cook County Health

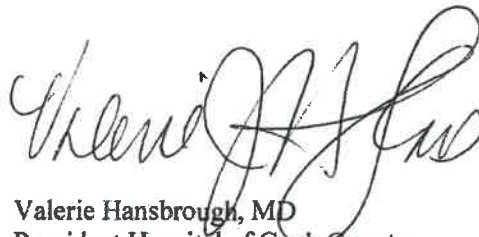
Deborah Santana  
CCH Secretary to the Board  
1950 W. Polk Street, Room 9106  
Chicago, IL 60612

September 6, 2019

Dear Members of the Quality and Patient Safety Committee:

Please be advised that at the Provident Hospital Medical Executive Committee Meeting held on September 6, 2019 the Medical Executive Committee recommended the actions on the enclosed list. It is being presented to you for your consideration.

Respectfully,



Valerie Hansbrough, MD  
Provident Hospital of Cook County  
President, Medical Staff  
Chair, Medical Executive Committee

# Provident Hospital of Cook County



**TO:** Quality and Patient Safety Committee

**FROM:** Valerie Hansbrough, MD  
President, Medical Executive Committee

**SUBJECT:** Medical Staff Appointments and Other Business Recommended by the **Medical Executive Committee** on 9/6/2019

Medical Staff Appointments/Reappointments Effective September 20, 2019 Subject to Approval by the CCH Quality and Patient Safety Committee.

## New Business

Initial Physician Appointment Applications:			
Name	Category	Department / Specialty	Appointment Term
Abu Homoud, Ahmad, MD	Active	Internal Medicine	September 20, 2019 thru September 19, 2021
Doscher, Matthew E., MD	Affiliate	Surgery/Plastic Surgery	September 20, 2019 thru September 19, 2021
Gans, Rhonda Y., MD	Active	Family Medicine	September 20, 2019 thru September 19, 2021
Thomas, Shantay, MD	Active	Family Medicine	September 20, 2019 thru September 19, 2021

## New Business

### Reappointment Physician Applications:

Department of Internal Medicine:			
Name	Category	Department/Specialty	Appointment Term
Ahmad, Nadeem, MD	Active	Internal Medicine	October 20, 2019 thru October 19, 2021
Grennan, Dara, MD	Consulting	Infectious Disease	December 8, 2019 thru December 7, 2021
Hamb, Aaron, MD	Voluntary	Internal Medicine	September 20, 2019 thru September 19, 2021
Mathew, Sujia, MD	Active	Internal Medicine	December 8, 2019 thru December 7, 2021

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<b>Department OB/GYN</b>			
<b>Name</b>	<b>Category</b>	<b>Department/Specialty</b>	<b>Appointment Term</b>
Gamble, Tondalaya, MD	Affiliate	OB/GYN	October 21, 2019 thru October 20, 2021

<b>Department of Pediatrics</b>			
<b>Name</b>	<b>Category</b>	<b>Department/Specialty</b>	<b>Appointment Term</b>
Dighe, Dipti, MD	Affiliate	Hematology/Oncology	October 19, 2019 thru October 18, 2021
Henry-Reid, Lisa, MD	Affiliate	Pediatrics	November 15, 2019 thru November 14, 2021

<b>Department of Surgery</b>			
<b>Name</b>	<b>Category</b>	<b>Department/Specialty</b>	<b>Appointment Term</b>
Mantilla Farfan, Nathalie, MD	Affiliate	Colon/Rectal	December 8, 2019 thru December 7, 2021

<b>Reapplication for Non-Physician Appointments</b>			
<b>Name</b>	<b>Category</b>	<b>Department/Specialty</b>	<b>Appointment Term</b>
El, Katherine, PA-C	Physician Assistant	Emergency Medicine	September 22, 2019 thru September 21, 2021
Feigon, Maia, Ph.D.	Clinical Psychology	Psychiatry	October 20, 2019 thru October 19, 2021

  
**CCHHS**  
**APPROVED**  
**BY THE QUALITY AND PATIENT SAFETY COMMITTEE**  
**ON SEPTEMBER 20, 2019**